|   |                                    |   |  |                                  |                                 |                                  |       |               | Application or Docket Number |        |            |  |  |
|---|------------------------------------|---|--|----------------------------------|---------------------------------|----------------------------------|-------|---------------|------------------------------|--------|------------|--|--|
| PATENT APPLICATION FEE DETERMINATION RECORD<br>Effective January 1, 2003              |                                    |   |  |                                  |                                 |                                  |       |               | 10642777                     |        |            |  |  |
|   |                                    |   | SMALL ENTITY OTHER THAN TYPE C OR SMALL ENTITY |                                  |                                 |                                  |       |               |                              |        |            |  |  |
| TOTAL CLAIMS  |                                    |   |  | P                                |                                 |                                  |       | RATE          | FEE                          |        | RATE       | FEE  |  |
| FOR   |                                    |   | MUMBER FRED                                    |                                  | NUMBER EXTRA                    |                                  |       | BASIC FEE     | 375.00                       | OR     | BASIC FEE  | 750.00   |  |
| TOTAL CHARGEABLE CLAIMS   |                                    |   | V minus 20=                                    |                                  | •                               |                                  |       | X\$ 9=        |                              | OR     | X\$18=     |  |  |
| INDEPENDENT CLAIMS  |                                    |   | 3 minus 3 =                                    |                                  | •                               |                                  |       | . X42=        |                              | OR     | X84=       |  |  |
| MU  | TIPLE DEPEN                        | DENT CLAIM P                                | RESENT   |                                  |                                 |                                  |       | +140=         |                              | OR     | +280°s     |  |  |
| * If the difference in column 1 is less than zero, enter "O" in column 2              |                                    |   |  |                                  |                                 |                                  |       | TOTAL         |                              | OR.    | TOTAL      |  |  |
|   | C                                  | LAIMS AS                                    |  |                                  | ,                               | OTHER                            | THAN  |               |                              |        |            |  |  |
| 1-  | 13-05                              | <b>L</b> .                                  | SMALL  |                                  | OR                              | SMALL                            | YITH  |               |                              |        |            |  |  |
| AMENDMENT A   |                                    | CLAMS<br>REMARCING<br>AFTER<br>AMENDMENT    |  | HACSI-<br>MAJIM<br>PREVI<br>PARO | BER                             | PRESENT<br>EXTRA                 |       | RATE          | ADDI-<br>TIONAL<br>FEE       |        | RATE       | ADDI-<br>TIONAL<br>FEE                           |  |
| 5   | Total                              | • 7   | Minus  | <b>-</b> 2                       | 30                              | .\                               | 1     | X\$ 9-        |                              | OR     | X\$18=     |  |  |
|   | Independent                        | • 1   | Minus  | ***                              | 3                               | - 7                              | ]     | X42=          |                              | OR     | X84a       |  |  |
| U   | FIRST PRESE                        | NTATION OF L                                | LLTIPLE DEF                                    | ENDEN                            | T CLASM                         |                                  | j     | +140=         |                              | OR     | +260=      |  |  |
|   |                                    |   |  |                                  |                                 |                                  |       | TOTAL         | <del> </del>                 | OR     | YOTAL      |  |  |
| O   | 22-05                              |   |  |                                  |                                 |                                  | _     | ADDIT. PEE    |                              | UN     | ADDIT. FEE |  |  |
| 7   | حكامل                              | (Cotumn 1)<br>CLASAS                        |  |                                  | ma 2)<br>HEST                   | (Catumn 8                        | ት     |               | ADDI-                        |        |            | ADDI-  |  |
| AMENDMENT 8   |                                    | REMARKING<br>AFTER<br>AMERICACENT           |  | PREV                             | ABER<br>IOUSLY<br>OFOR          | PRESENT<br>EXTRA                 |       | RATE          | TIONAL                       |        | RATE       | TIONAL   |  |
| 8   | Total                              | . 2   | Minus  | <b>4</b>                         | 20                              | • /                              |       | X\$ 9-        |                              | OЯ     | X\$18=     |  |  |
| AME   | Independent                        | NTXTION OF I                                | Minus<br>5000505                               |                                  | 7                               | - <del> </del>                   | 4     | X42-          |                              | OR     | X84=       | 1  |  |
| Ľ   | HHST PRESE                         | HIAHUN UP I                                 | IULI IPLE LIES                                 | ENCEN                            | Coun                            |                                  | ٤     | +140=         |                              | OR     | +280=      |  |  |
|   |                                    |   |  |                                  |                                 |                                  |       | ACOTT. FEE    |                              | OR     | ADDIT. FEE |  |  |
| //-25-95 (Column 1) (Column 2) (Column 5)  CIAINS HIGHEST PRESENT ADDI-               |                                    |   |  |                                  |                                 |                                  |       |               |                              |        |            |  |  |
| MC  |                                    | CLAIMS<br>REMAINING<br>· AFTER<br>AMENDMENT |  | NUI<br>PREV                      | MEST<br>MSEA<br>MOUSLY<br>D FOR | PRESENT                          |       | RATE          | ADDI-<br>TIONAL<br>FEE       |        | RATE       | ADDI-<br>TIONAL<br>FEE                           |  |
| AMENDMENT   | Total                              | . 8   | Minus  |                                  | 20                              | .0                               |       | X3 9-         |                              | ar     | X\$18=     |  |  |
|   | Independent                        | • /   | Minus  | -                                | 3                               | .0                               | 1     | X42=          | t                            | OR     | V04-       |  |  |
| Ľ   | FIRST PRES                         | ENTATION OF                                 | MULTIPLE DE                                    | PENDE                            | EALO TI                         |                                  | L     |               | 1                            | 1      |            | <del>                                     </del> |  |
| " If the entry is column 1 is less than the entry is column 2, write "0" in column 3. |                                    |   |  |                                  |                                 |                                  |       | +140>         | <u> </u>                     | OR     | +280=      | <b> </b>   |  |
| -   | If the Williams to                 | ADDIT. FEI                                  |  | OR                               | ADDIT FEE                       | <b></b>                          |       |               |                              |        |            |  |  |
| l -   | The Tighes! His<br>The Tighes! His | uniper Previously<br>other Previously       | ress For St TH<br>Paid For (Total o            | ni bitka<br>v indeper            | nderd) is th                    | n gighest tru:<br>en er enter er | ber ( | ound in the c | ppropriate b                 | m in ¢ | olumn 1.   |  |  |